



**APPLICATION FOR REINSTATEMENT OF A COSMETOLOGY SALON/SHOP LICENSE  
GEORGIA STATE BOARD OF COSMETOLOGY**

**237 Coliseum Drive  
Macon, Georgia 31217  
Phone (478) 207-2440  
Fax: (866) 888-1176**

**[www.sos.ga.gov/plb/cosmetology](http://www.sos.ga.gov/plb/cosmetology)**

Please read the instructions carefully and be familiar with the laws and rules governing the practice of Cosmetology/Hair Designer/Nail Technology/Esthetics in the State of Georgia. Visit our website for information:

**<http://www.sos.ga.gov/plb/cosmetology>**

**\*\*Important\*\***

**The Board cannot process incomplete applications. If any item is missing, incomplete or incorrect, your application cannot be reviewed by the Board. Please review this application before you submit it to ensure that all information and documentation is complete and correct. Incomplete applications result in delayed processing. Incomplete applications are void after one year. Furthermore, because application information is time sensitive, documents cannot be transferred from old applications to new applications.**

**Application Checklist**

**The following checklist is an important part of your application. Please use this checklist to ensure that you submit a COMPLETE application.**

☐ **NON-REFUNDABLE FEE: (See attached fee schedule)** The payment must be made by check or money order payable to the Georgia State Board of Cosmetology. **DO NOT SEND CASH OR COUNTER CHECKS.** Checks returned for insufficient funds are subject to a \$40.00 service charge pursuant to O.C. G.A. § 16-9-20. **Please note: any time a salon/shop moves, changes address, changes the name, or changes ownership a new application must be submitted to the board with the processing fee.**

☐ **NOTARIZED APPLICATION:** Send the *notarized* application to the Board office at the address listed above, along with the correct fee. *All questions must be answered.* If your answer to the conviction question or sanction question is “yes,” further documentation will need to be submitted. Attach an explanation if you have had any criminal convictions or charges, as well as a copy of the conviction/sentencing documents from the court. If sanctioned by another state licensing board, a certified copy of the action taken must be submitted. The Board will review the application with the required documentation. **Approval of licensure is at the Board’s discretion.**

☐ **CITIZENSHIP/QUALIFIED ALIEN STATUS:** Please submit a copy of your current Secure and Verifiable Document(s) such as driver’s license, passport, or document as indicated on pages 6 & 7 of this application. If not a U.S. citizen, please attach documentation and complete form to determine qualified alien status.

☐ **SUBMIT APPLICATION IN A 9X12 or LARGER ENVELOPE – Do not staple pages or check/money order. Do not fold pages of the application.**

☐ **The name of the salon/shop must include the word **salon** or **shop**.**

FOR BOARD USE ONLY  
 Amount Submitted \_\_\_\_\_  
 Date \_\_\_\_\_  
 Receipt # \_\_\_\_\_



FOR BOARD USE ONLY  
 Certificate Number \_\_\_\_\_  
 Date Issued \_\_\_\_\_  
 Applicant No. \_\_\_\_\_

**GEORGIA STATE BOARD OF COSMETOLOGY**  
 237 Coliseum Drive • Macon, Georgia 31217 • (478) 207-2440  
[www.sos.ga.gov/plb/cosmetology](http://www.sos.ga.gov/plb/cosmetology)

**APPLICATION FOR REINSTATEMENT OF COSMETOLOGY SALON/SHOP LICENSE**  
 Non-Refundable Application Fee (See attached fee schedule)

**Name of Shop/Salon:** \_\_\_\_\_

The name of the salon/shop must include the word salon or shop.

**Shop/Salon License Number:** \_\_\_\_\_ (attach a copy of license if available).

**Type of License held:** ( ) Cosmetology Salon ( ) Nail Salon ( ) Esthetician Salon/Spa

**Fee to Submit:** \_\_\_\_\_

**Is this Salon/Shop Located in a residence/home?** Yes \_\_\_\_\_ No \_\_\_\_\_

**Additional License Types held (currently or previously issued to the owner(s) by the Georgia Professional Licensing Boards):** \_\_\_\_\_

---

**Federal Employee Identification Number or Social Security Number**

\*THIS INFORMATION IS AUTHORIZED TO BE OBTAINED & DISCLOSED TO STATE & FEDERAL AGENCIES PURSUANT TO O.C.G.A. § 19-11-1 & O.C.G.A. § 20-3-295, 42 U.S.C.A. § 551 & 20 U.S.C.A. § 101.

**Salon/Shop Physical (Business Location) Address:**

**PO Box is not acceptable:** \_\_\_\_\_  
 Number and Street Apt. No City/State Zip

**Mailing Address** \_\_\_\_\_  
 (if different from business location) Number and Street Apt. No City/State Zip

(If you are granted a license, your name, mailing address and license number becomes public information and will be posted on the Secretary of State's website. The mailing address is used for renewal notices and application processing.)

\_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_  
 Shop Telephone Number Cell Telephone Number Evening Phone Number \* E-Mail Address

**This application will be returned if you do not answer the questions on this page.**

**Have the owner(s) ever been convicted of a felony or misdemeanor (other than minor traffic violation) or entered a plea of guilty, nolo contendere or under the "First Offender Act," or been sanctioned by another board or agency? DUI and DWI are not minor traffic violations. ☐ Yes ☐ No**



If you answered "Yes" to the question regarding court convictions, you must submit to the Board the following: a) a copy of conviction/sentencing document(s) from the Court before which you were convicted and sentenced, signed by the presiding judge, and showing said conviction and sentence; AND, if applicable, b) a statement (on official letterhead) from your probation / parole officer regarding your current status/completion of any probation / parole. Your application will not be processed until this information is received and reviewed by the Board.

**Have the owner(s) ever had a license revoked, suspended, or otherwise sanctioned by any professional licensing board or agency, or have you ever been denied issuance of, or pursuant to disciplinary proceedings refused renewal of a license by any professional licensing board or agency in Georgia or any other state?**

**☐ Yes ☐ No**



If you answered "Yes" regarding sanctions from another board, you must request that the licensing board or agency send a certified copy of the action taken against your license with relevant supporting documents to the Board's office. Your application will not be processed until this information is received and reviewed by the Board.

**APPLICANT AFFIDAVIT:**

I hereby swear and affirm that all information provided in this application is true and correct to the best of my knowledge and belief. I further swear and affirm that I have read and understand the current state laws and rules and regulations of the Georgia State Board of Cosmetology and I agree to abide by these laws and rules, as amended from time to time.

By signing this application, electronically or otherwise, I hereby swear and affirm one of the following to be true and accurate pursuant to O.C.G.A. § 50-36-1:

1) \_\_\_\_\_ I am a United States citizen 18 years of age or older. Please submit a copy of your current Secure and Verifiable Document(s) such as driver's license, passport, or document as indicated on pages 6 & 7 of this application.

2) \_\_\_\_\_ I am not a United States citizen, but I am a legal permanent resident of the United States 18 years of age or older, or I am a qualified alien or non-immigrant under the Federal Immigration and Nationality Act 18 years of age or older with an alien number issued by the Department of Homeland Security or other federal immigration agency. Please submit a copy of your current immigration document(s) which includes either your Alien number or your I-94 number and, if needed, SEVIS number.

In making the above attestation, I understand that any failure to make full and accurate disclosures may result in disciplinary action by the Georgia State Board of Cosmetology and/or criminal prosecution.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Applicant's Name

Personally appeared before me, the undersigned official authorized to administer oaths, comes

\_\_\_\_\_ who deposes and swears that he/she is the person who executed this  
(Applicant's Name)  
application for a license by examination for Cosmetology in the State of Georgia; and that all of the statements  
herein contained are true to the best of his/her knowledge and belief.

Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 2\_\_\_\_\_

Notary Public Signature \_\_\_\_\_

\_\_\_\_\_  
County

\_\_\_\_\_  
State

My Commission Expires \_\_\_\_\_

(seal)

**GEORGIA STATE BOARD OF COSMETOLOGY  
FEE SCHEDULE**

Applications for <b>initial licensure</b> after passing examination	<b>\$30</b>
<b>Applications for Out of State/ Country Reciprocity</b>	<b>\$50</b>
<b>Master Cosmetologist License Renewal March 31, even years</b>	<b>\$50</b>
Late Renewal (within 6 months)	\$100
Reinstatement (after 6 months–2 years)	\$200
Reinstatements (after 2 years)	\$300
<b>Esthetician or Nail Technician Renewal August 31, odd years</b>	<b>\$45</b>
Late Renewal (within 6 months)	\$90
Reinstatement (after 6 months – 2 years)	\$185
Reinstatements (after 2 years)	\$250
<b>Apprentice (all) License expires 2 years from the date of issuance; may renew 30 days prior to expiration date.</b>	<b>\$45</b>
Late Renewal (within 6 months)	\$90
Reinstatement (after 6 months)	\$100
<b>Cosmetology Salon/Shop Renewal June 30, odd years</b>	<b>\$75</b>
Late Renewal (within 6 months)	<b>\$200</b>
Reinstatement (after 6 months – 2 years)	<b>\$300</b>
Reinstatement (after 2 years)	<b>\$300</b>
<b>School License Renewal June 30, odd years</b>	<b>\$300</b>
Late Renewal (within 6 months)	\$600
Reinstatement (after 6 months)	\$1000
<b>Instructor License (all professions) June 30, odd years</b>	<b>\$75</b>
Late Renewal (within 6 months)	\$150
Reinstatement (after 6 months – 2years)	\$250
Reinstatement (after 2 years)	\$300

**APPLICANT: PLEASE CHECK THE FORM OF IDENTIFICATION BELOW THAT YOU POSSESS. RETURN THIS FORM ALONG WITH A COPY OF YOUR APPROPRIATE DOCUMENTATION.**

\_\_\_\_\_  
**Name**

Secure and Verifiable Documents Under O.C.G.A. § 50-36-2  
Issued August 1, 2011 by the Office of the Attorney General, Georgia

The Illegal Immigration Reform and Enforcement Act of 2011 (“IIREA”) provides that “[n]ot later than August 1, 2011, the Attorney General shall provide and make public on the Department of Law’s website a list of acceptable secure and verifiable documents. The list shall be reviewed and updated annually by the Attorney General.” O.C.G.A. § 50-36-2(f). The Attorney General may modify this list on a more frequent basis, if necessary.

The following list of secure and verifiable documents, published under the authority of O.C.G.A. § 50-36-2, contains documents that are verifiable for identification purposes, and documents on this list may not necessarily be indicative of residency or immigration status.

\_\_\_\_\_ A United States passport or passport card [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]

\_\_\_\_\_ A United States military identification card [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]

\_\_\_\_\_ A driver’s license issued by one of the United States, the District of Columbia, the Commonwealth of Puerto Rico, Guam, the Commonwealth of the Northern Marianas Islands, the United States Virgin Island, American Samoa, or the Swain Islands, provided that it contains a photograph of the bearer or lists sufficient identifying information regarding the bearer, such as name, date of birth, gender, height, eye color, and address to enable the identification of the bearer [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]

\_\_\_\_\_ An identification card issued by one of the United States, the District of Columbia, the Commonwealth of Puerto Rico, Guam, the Commonwealth of the Northern Marianas Islands, the United States Virgin Island, American Samoa, or the Swain Islands, provided that it contains a photograph of the bearer or lists sufficient identifying information regarding the bearer, such as name, date of birth, gender, height, eye color, and address to enable the identification of the bearer [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]

\_\_\_\_\_ A tribal identification card of a federally recognized Native American tribe, provided that it contains a photograph of the bearer or lists sufficient identifying information regarding the bearer, such as name, date of birth, gender, height, eye color, and address to enable the identification of the bearer. A listing of federally recognized Native American tribes may be found at:  
<http://www.bia.gov/WhoWeAre/BIA/OIS/TribalGovernmentServices/TribalDirectory/index.htm>  
[O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]

\_\_\_\_\_ A United States Permanent Resident Card or Alien Registration Receipt Card [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]

\_\_\_\_\_ An Employment Authorization Document that contains a photograph of the bearer [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]

\_\_\_\_\_ A passport issued by a foreign government [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]

- \_\_\_\_\_ A Merchant Mariner Document or Merchant Mariner Credential issued by the United States Coast Guard [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
- \_\_\_\_\_ A Free and Secure Trade (FAST) card [O.C.G.A. § 50-36-2(b)(3); 22 CFR § 41.2]
- \_\_\_\_\_ A NEXUS card [O.C.G.A. § 50-36-2(b)(3); 22 CFR § 41.2]
- \_\_\_\_\_ A Secure Electronic Network for Travelers Rapid Inspection (SENTRI) card [O.C.G.A. § 50-36-2(b)(3); 22 CFR § 41.2]
- \_\_\_\_\_ A driver's license issued by a Canadian government authority [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
- \_\_\_\_\_ A Certificate of Citizenship issued by the United States Department of Citizenship and Immigration Services (USCIS) (Form N-560 or Form N-561) [O.C.G.A. § 50-36-2(b)(3); 6 CFR § 37.11]
- \_\_\_\_\_ A Certificate of Naturalization issued by the United States Department of Citizenship and Immigration Services (USCIS) (Form N-550 or Form N-570) [O.C.G.A. § 50-36-2(b)(3); 6 CFR § 37.11]
- \_\_\_\_\_ In addition to the documents listed herein, if, in administering a public benefit or program, an agency is required by federal law to accept a document or other form of identification for proof of or documentation of identity, that document or other form of identification will be deemed a secure and verifiable document solely for that particular program or administration of that particular public benefit. [O.C.G.A. § 50-36-2(c)]